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Image# 201604159012566168

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X   Fo	or Other	Than An Au	uthorized	Committe	ee			
1. NAME OF T	YPE OR P	PRINT ▼	Eva	mple: If typi	na type		Office Use	e Only
COMMITTEE (in full)	0	······ •		r the lines.	ng, type	12FE4M5	;	
INDIANA JOBS NOW								1
	PO Box 9	901						
ADDRESS (number and street)	PO BOX 9	091						
Check if different								
than previously reported. (ACC)	Arlington					VA	22219	
2. FEC IDENTIFICATION NUM	MBER ▼		SITY 🛦			STATE A		ZIP CODE A
C C00603159		3.	IS THIS REPORT	· · ·	NEW (N) <b>OR</b>	Al (A	MENDED .)	
4. TYPE OF REPORT	(b) Mont	, ,	eb 20 (M2)		May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election
(Choose One)	Due	On:	ar 20 (M3)	П	Jun 20 (M6)	Sep	20 (M9)	Year Only)  Dec 20 (M12) (Non-Election
(a) Quarterly Reports:		A	or 20 (M4)	Π.	Jul 20 (M7)	Oct	20 (M10)	Year Only)  Jan 31 (YE)
April 15 Quarterly Report (Q1	) (c)	12-Day	П	Primary (12F	p)	General	(12G)	Runoff (12R)
July 15 Quarterly Report (Q2		PRE-Election	H			-		Transm (TET)
October 15 Quarterly Report (Q3	3)	Report for the:		Convention (	(120)	Special	(125)	
January 31 Year-End Report (YE		Elec	tion on	M = M /	D   D /	Y . Y . Y . Y	]	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)		30-Day POST-Election	П	General (300	G)	Runoff (	30R)	Special (30S)
Termination Report		Report for the:				·	_	
(TER)		Elec	tion on	M M /	D D /	Y " Y " Y " Y		in the State of
5. Covering Period 01	/ D C	2016		through	03	31	201	6
certify that I have examined this	Report ar	nd to the best	of my kno	wledge and	belief it is tr	ue, correct an	d complete	е.
Type or Print Name of Treasurer	MICHELE	EREISNER						
Signature of Treasurer MICHE	ELE REISNE	ER .		[Electronicall	y Filed] [	Date 04	M / D 15	2016
NOTE: Submission of false, erroned	ous, or incc	omplete informat	ion may sı	bject the per	son signing t	his Report to t	he penaltie	es of 2 U.S.C. §437g.
Office							T	FORM 3X
Use Only								ev. 12/2004

#### SUMMARY PAGE OF RECEIPTS AND DISRUPSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name INDIANA JOBS NOW 2016 03 2016 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.00 January 1, 2016 (b) Cash on Hand at 0.00 Beginning of Reporting Period..... 370000.00 370000.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 370000.00 370000.00 6(a) and 6(c) for Column B)..... 347042.80 347042.80 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 22957.20 22957.20 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

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	וטוו		$\wedge$	JUL		1 1/	<b>→</b> ∨ ∨	

Report Covering the Period: From: 01	01 2016	To: 03 31 2016
I. Receipts	COLUMN A	COLUMN B
i. neceipis	Total This Period	Calendar Year-to-Date
1. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	370000.00	370000.00
(i) iternized (use Schedule A)		
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	370000.00	370000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry  Totals to Line 33, page 5)	370000.00	370000.00
2. Transfers From Affiliated/Other	0.000.00	
Party Committees	0.00	0.00
,		
3. All Loans Received	0.00	0.00
_		
4. Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds	•	
(a) Non-Federal Account	0.00	2.00
(from Schedule H3)	0.00	0.00
"\" 5 \ " 6 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(v) Total Transiers (add To(a) and To(b))	3.00	0.00
Total Descints (add Lines 44/d)		
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	370000.00	370000.00
12, 10, 17, 10, 11, and 10(0))	370000.00	370000.00
). Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	370000.00	370000.00
	9 9	

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

Total This Period	Calendar Year-to-Date
0.00	0.00
0.00	0.00
0.00	0.00
47847.55	47847.55
47847.55	47847.55
0.00	0.00
0.00	0.00
0.00	3.00
299195.25	299195.25
0.00	
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	2.00
0.00	0.00
347042.80	347042.80
7	
347042 80	347042.80
	47847.55 47847.55 0.00 0.00 0.00 299195.25 0.00 0.00 0.00 0.00 0.00 0.00 0.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	370000.00	370000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
85. Net Contributions (other than loans) (subtract Line 34 from Line 33)	370000.00	370000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	47847.55	47847.55
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	47847.55	47847.55

#### SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

	FOF	FOR LINE NUMBER: PAGE 6 OF								15
Use separate schedule(s) for each category of the	(che	ck only	or	ne)						
Detailed Summary Page	<u> </u> ×	11a		11b		11c		12		
		13		14		15		16		17

	ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) INDIANA JOBS NOW		
Full Name (Last, First, Middle Initial) JOE A HOLLINGSWORTH JR  Mailing Address 2 CENTRE PLAZA  City CLINTON  FEC ID number of contributing federal political committee.  Name of Employer THE HOLLINGSWORTH COMPANIES Receipt For: Primary General Other (specify)   Company	State Zip Code TN 37716  C  Occupation OWNER  Aggregate Year-to-Date ▼  260000.00	Date of Receipt  12 2016  Transaction ID: SA11AI.4195  Amount of Each Receipt this Period  260000.00  Memo Item
Full Name (Last, First, Middle Initial)  JOE A HOLLINGSWORTH JR  Mailing Address 2 CENTRE PLAZA  City CLINTON  FEC ID number of contributing federal political committee.  Name of Employer THE HOLLINGSWORTH COMPANIES  Receipt For: Primary General Other (specify)   Other (specify)	State Zip Code TN 37716  C  Occupation OWNER  Aggregate Year-to-Date ▼  370000.00	Date of Receipt  03 02 2016  Transaction ID : SA11AI.4196  Amount of Each Receipt this Period  110000.00  Memo Item
Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary General Other (specify)   Other (specify)	State Zip Code  C Occupation  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	370000.00
TOTAL This Period (last page this line numbe	er only)	370000.00

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 7 OF 15	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)		
	Detailed Summary Page	X 21b	22 23 24 25 26 28a 28b 28c 29 30b	
Any information conicd from such Departs and Obliga	conto mou not be celebrative			
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)				
NDIANA JOBS NOW				
Full Name (Last, First, Middle Initial)			Data of Bishamanasi	
CROSBY OTTENHOFF GROUP			Date of Disbursement	
Mailing Address 611 PENNSYLVANIA AVE #267	7.0.4		02 16 2016	
City S WASHINGTON	State Zip Code DC 20003		Transaction ID : SB21B.4190	
Purpose of Disbursement	20000			
CÓMPLIANCE CONSULTING			Amount of Each Disbursement this Period	
Candidate Name		Category/	950.00	
Office Sought: House Disbursen	nent For:	Туре		
	Primary General		Memo Item	
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Date of Disbursement	
3. CROSBY OTTENHOFF GROUP			Date of Dispursement	
Mailing Address 611 PENNSYLVANIA AVE #267			03 15 2016	
•	State Zip Code DC 20003		Transaction ID : SB21B.4193	
WASHINGTON Purpose of Disbursement	DC 20003			
COMPLIANCE CONSULTING			Amount of Each Disbursement this Period	
Candidate Name		Category/	650.00	
Office Sought: House Disbursen	nont For:	Туре		
	Primary General		Memo Item	
	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Data of Dishuraness	
C. LOCKE LORD LLP			Date of Disbursement	
Mailing Address 600 CONGRESS AVE			02 25 _ 2016 _	
SUITE 2200				
•	State Zip Code TX 78701		Transaction ID : SB21B.4191	
Purpose of Disbursement	10101			
LEGAL CONSULTING			Amount of Each Disbursement this Period	
Candidate Name		Category/	643.75	
Office Sought: House Disbursen	nent For:	Туре		
	Primary General		Memo Item	
	Other (specify) ▼			
State: District:				
			2243.75	
SUBTOTAL of Disbursements This Page (optional)		<u> </u>	2240.10	
TOTAL This Period (last nage this line number only)				

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only X 21b 27	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) INDIANA JOBS NOW	ents may not be sold or used e and address of any political	by any perso committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  A. NATIONAL RESEARCH INC.  Mailing Address 146 STATE HIGHWAY 34  SUITE 250			Date of Disbursement  O2 25 2016
City	tate Zip Code NJ 07733	Category/	Transaction ID : SB21B.4192  Amount of Each Disbursement this Period  26000.00
President State: District:	nent For: Primary General Other (specify)	Туре	Memo Item
Full Name (Last, First, Middle Initial)  B. NATIONAL RESEARCH INC.  Mailing Address 146 STATE HIGHWAY 34 SUITE 250			Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
HOLMDEL Purpose of Disbursement SURVEY RESEARCH  Candidate Name  Office Sought: House Disbursem Senate		Category/ Type	Amount of Each Disbursement this Period  14500.00  Memo Item
ARLINGTON Purpose of Disbursement RESEARCH Candidate Name  Office Sought: House Disbursem Senate	tate Zip Code VA 22216	Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only).			45523.80 47767.55

TEMIZED INDEPENDENT EXPENDITURES		PAGE 9 OF 15 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) INDIANA JOBS NOW		FEC IDENTIFICATION NUMBER ▼
INDIANA JOBS NOVV		C C00603159
Check if 24-hour report 48-hour report New	report Amends report file	ed on Man / Dan / Yayayay
Full Name of Payee CROSSROADS MEDIA LLC	☐ Memo Item	Date of Public Distribution/Dissemination
		01 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 66 CANAL CENTER PLAZA		Amount
SUITE 555 City State	Zip Code	37079.00
ALEXANDRIA VA	22314	Transaction ID : SE.4100  Date of Disbursement or Obligation
Purpose of Expenditure MEDIA	Category/ Type 004	01 / 21 / 2016
Name of Federal Candidate	Support Offi	ice Sought: X House District: 09
TREY HOLLINGSWORTH	Oppose	President Senate State: IN
Calendar Year-To-Date Per Election for Office Sought	37079.00 Dis 201	sbursement For:
Full Name of Payee	☐ Memo Item	Date of Public Distribution/Dissemination
CROSSROADS MEDIA LLC	_	01 22 2016
Mailing Address 66 CANAL CENTER PLAZA		Amount
SUITE 555		97070 00
City State ALEXANDRIA VA	Zip Code 22314	37079.00  Transaction ID : SE.4103  Date of Disbursement or Obligation
Purpose of Expenditure MEDIA	Category/ Type 004	01 21 / 2016
Name of Federal Candidate	Support Off	fice Sought:
GREGORY FRANCIS MR. ZOELLER	∑ Oppose	President Senate State: IN
Calendar Year-To-Date Per Election for Office Sought	74158.00 Dis 20	sbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		74158.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	<b>&gt;</b>	
Under penalty of perjury I certify that the independent expenditu with, or at the request or suggestion of, any candidate or authority party committee) any political party committee or its agent.	•	·
MICHELE REISNER [Elect	tronically Filed]	M / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	Date	2010

TEMIZED INDEPENDENT EXPENDITURES	PAGE 10 OF 15 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
INDIANA JOBS NOW	C C00603159
Check if 24-hour report 48-hour report New report Amends report file	ed on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	01 29 2016
66 CANAL CENTER PLAZA SUITE 555	Amount
City State Zip Code	56704.18
ALEXANDRIA VA 22314	Transaction ID : SE.4140  Date of Disbursement or Obligation
Purpose of Expenditure MEDIA  Category/ Type  004	01 / 28 / 2016
Name of Federal Candidate Support Offi	fice Sought: House District: 09
TREY HOLLINGSWORTH Oppose	President Senate State: IN
Calendar Year-To-Date Per Election for Office Sought  Dis 201	Sbursement For: X Primary General
Full Name of Payee	Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 66 CANAL CENTER PLAZA	Amount
SUITE 555	5670419
City State Zip Code ALEXANDRIA VA 22314	Transaction ID : SE.4142  Date of Disbursement or Obligation
Purpose of Expenditure MEDIA  Category/ Type	Date of Disbursement of Obligation  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offi	fice Sought: X House District: 09
GREGORY FRANCIS MR. ZOELLER Oppose	President Senate State: IN
Calendar Year-To-Date Per Election for Office Sought  216760.36  Dis 20	sbursement For: X Primary General  Other (specify)   Other
(a) SUBTOTAL of Itemized Independent Expenditures	113408.36
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not r with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
MICHELE REISNER  [Electronically Filed]	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature Date	04 15 2016

Signature

# SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITUR	ES			PAGE 11 OF 15 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
INDIANA JOBS NOW				C C00603159
Check if 24-hour report 48-hour report	New rep	port Amends rep		M / D D / Y H Y H Y
Full Name of Payee		☐ Memo I	tem Date o	of Public Distribution/Dissemination
CROSSROADS MEDIA LLC				03
Mailing Address 66 CANAL CENTER PLAZA			Amour	
SUITE 555			Amou	11.
City	State	Zip Code		33745.75
ALEXANDRIA	VA	22314		ction ID: SE.4154 of Disbursement or Obligation
Purpose of Expenditure MEDIA		Category/ Type 004	M	03 02 7 2016
Name of Federal Candidate		Support	Office Sought	t: X House District:09
TREY HOLLINGSWORTH		Oppose	Preside	IN IN
Outland and Vision To Date			Disbursement	
Calendar Year-To-Date Per Election for Office Sought		254606.50	2016	ther (specify)
Full Name of Payee		☐ Memo It		of Public Distribution/Dissemination
CROSSROADS MEDIA LLC			Date	- M / D D / Y Y Y Y Y
Mailing Address			L	03 03 2016
66 CANAL CENTER PLAZA			Amou	nt
SUITE 555	State	Zip Code		33745.75
ALEXANDRIA	VA	22314		ction ID : SE.4156
Purpose of Expenditure		T		of Disbursement or Obligation
MEDIA		Category/ Type 004		03 02 7 2016
Name of Federal Candidate		Support	Office Sough	t: X House District: 09
GREGORY FRANCIS MR. ZOELLER		Oppose	Preside	ent Senate State: IN
Calendar Year-To-Date		22222 25	Disbursemen	t For: Rimary General
Per Election for Office Sought		288352.25	2016 O	ther (specify) -
(a) SUBTOTAL of Itemized Independent Expend	itures			67491.50
(b) SUBTOTAL of Unitemized Independent Expe	nditures		··· •	7 1 7 1 7
(c) TOTAL Independent Expenditures			··· • .	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any can party committee) any political party committee or	didate or authorized			
MICHELE REISNER	[Electron	nically Filed] Dat	e 04 /	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cianatura				

Signature

# SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES	PAGE 12 OF 15				
	FOR LINE 24 OF FORM 3X				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
INDIANA JOBS NOW	C C00603159				
Check if 24-hour report 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y				
Full Name of Payee	Date of Public Distribution/Dissemination				
Mailing Address	01 22 2016				
201 N UNION ST	Amount				
SUITE 200	0991 50				
City State Zip Code  ALEXANDRIA VA 22314 T	9881.50  Fransaction ID: SE.4128				
7.2.7.11.	Date of Disbursement or Obligation				
Purpose of Expenditure MEDIA PRODUCTION  Category/ Type  004	01 22 7 2016				
Name of Federal Candidate Support Office	Sought: X House District: 09				
TREV HOLLINGSWORTH	President Senate State: IN				
Calendar Year-To-Date Per Election for Office Sought  Disburs 2016	rsement For: X Primary General  Other (specify) ▶				
Full Name of Payee	Date of Public Distribution/Dissemination				
SRCP MEDIA INC. PRODUCTION	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 204 NUMION ST	01 22 2016				
201 N UNION ST	Amount				
SUITE 200 City State Zip Code	9881.50				
ALEXANDRIA VA 22314	Transaction ID : SE.4130  Date of Disbursement or Obligation				
Purpose of Expenditure MEDIA PRODUCTION  Category/ Type  004	01 22 / 2016				
Name of Federal Candidate Support Office	Sought:				
GREGORY ERANCIS MR. ZOELLER	President Senate State: IN				
Оррово	Flesident State				
Calendar Year-To-Date Per Election for Office Sought 93921.00 Disbur 2016	rsement For: X Primary General  Other (specify) ▶				
(a) SUBTOTAL of Itemized Independent Expenditures	19763.00				
(4)	7 7 7				
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
MICHELE REISNER [Electronically Filed] Date 04	15 2016				

Date

TE	EMIZED INDEPENDENT EXPENDITU	RES			PAGE 13 OF 15 FOR LINE 24 OF FORM 3X	
	AME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼	
II.	NDIANA JOBS NOW				C C00603159	
Ch	neck if 24-hour report 48-hour report	rt New repo	ort Amends repo		M = M / D = D / Y = Y = Y = Y	
	Full Name of Payee SRCP MEDIA INC. PRODUCTION		☐ Memo Ite	em Date	of Public Distribution/Dissemination	
					03 03 2016	
	Mailing Address 201 N UNION ST			Amou	unt	
	SUITE 200	Ctata	75- O-do		5424.50	
	City ALEXANDRIA	State VA	Zip Code 22314	Trans	5421.50 action ID : SE.4157	
	Purpose of Expenditure		T	Date	of Disbursement or Obligation	
	MEDIA PRODUCTION		Category/ Type 004	$\Box \mid \Box$	03 / 04 / 2016	
	Name of Federal Candidate		X Support	Office Soug	ht: X House District:09	
	TREY HOLLINGSWORTH		Oppose	Presid	dent Senate State: IN	
	Calendar Year-To-Date		202770 75	Disburseme	nt For: Primary General	
	Per Election for Office Sought		293773.75	2016	Other (specify)	
	Full Name of Payee		☐ Memo Ite	m Date	of Public Distribution/Dissemination	
	SRCP MEDIA INC. PRODUCTION	JN			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	Mailing Address 201 N UNION ST			Amo	unt	
	SUITE 200					
	City	State	Zip Code	Trans	5421.50 action ID : SE.4158	
	ALEXANDRIA	VA	22314	I	of Disbursement or Obligation	
	Purpose of Expenditure MEDIA PRODUCTION		Category/ Type 004	$\exists \mid \llbracket$	03 / 04 / 2016	
	Name of Federal Candidate		Support	Office Soug	ht: X House District: 09	
	GREGORY FRANCIS MR. ZOELLER		Oppose	Presid	INI	
	Calendar Year-To-Date		1.1.1.1.1	Disburseme	ent For: Primary General	
	Per Election for Office Sought		299195.25	2016	Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures						
(b) SUBTOTAL of Unitemized Independent Expenditures						
	(c) TOTAL Independent Expenditures					
	(b) 10 112 1140 1141 1141 1141 1141 1141 11				7 7 7	
	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	MICHELE REISNER	[Electron	nically Filed] Date	M M /	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	Signature					

Signature

# SCHEDULE E (FEC Form 3X)

TEMIZED INDEDENDENT EVENDITUDES	D.O.S. 44 O.S. 45					
TEMIZED INDEPENDENT EXPENDITURES	PAGE 14 OF 15 FOR LINE 24 OF FORM 3X					
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼					
INDIANA JOBS NOW	C C00603159					
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y					
	of Public Distribution/Dissemination					
TARGETED VICTORY	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Mailing Address 1033 NORTH FAIRFAX STREET						
SUITE 400	unt					
City State Zip Code	4715.50					
Date	action ID : SE.4133 of Disbursement or Obligation					
Purpose of Expenditure MEDIA PRODUCTION/MEDIA  Category/ Type  004	01 22 7 2016					
Name of Federal Candidate Support Office Sough	ht: X House District:09					
TREY HOLLINGSWORTH Oppose Presid	IN					
Calendar Year-To-Date Per Election for Office Sought  Disbursement 2016	ent For:					
Full Name of Payee	of Public Distribution/Dissemination					
TARGETED VICTORY	01 25 2016					
Mailing Address 1033 NORTH FAIRFAX STREET Amou						
SUITE 400	unt					
City State Zip Code	4715.50					
Date	action ID: SE.4134 of Disbursement or Obligation					
Purpose of Expenditure MEDIA PRODUCTION/MEDIA  Category/ Type  004	01 / 22 / 2016					
Name of Federal Candidate Support Office Soug	ght: X House District: 09					
GREGORY FRANCIS MR. ZOELLER Oppose Presid						
Calendar Year-To-Date Per Election for Office Sought  Disbursement 2016	ent For:					
(a) SUBTOTAL of Itemized Independent Expenditures	9431.00					
(a) SOBTOTAL of Remized independent Expenditures	3431.00					
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures	7 7 7					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.						
MICHELE REISNER  [Electronically Filed] Date 04 15 2016						

' -	EMIZED INDEPENDENT EXPENDITURES		FOR LINE 24 OF FORM 3X			
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼			
۱N	NDIANA JOBS NOW		C C00603159			
			O state to			
Check if 24-hour report 48-hour report New report Amends report filed on						
	Full Name of Payee TARGETED VICTORY	☐ Memo Item	M M / D D / Y Y Y Y			
	Mailing Address 1033 NORTH FAIRFAX STREET		02 11 2016 Amount			
	SUITE 400		Amount			
١	City State	Zip Code	2050.20			
	ALEXANDRIA VA	22314	Transaction ID : SE.4148  Date of Disbursement or Obligation			
	Purpose of Expenditure MEDIA	Category/ Type	02 / 12 / 2016			
١	Name of Federal Candidate	X Support (	Office Sought:			
	TREY HOLLINGSWORTH	Oppose	President Senate State: IN			
	Calendar Year-To-Date Per Election for Office Sought		Disbursement For:			
	Full Name of Payee TARGETED VICTORY	☐ Memo Item	Date of Public Distribution/Dissemination			
	Mailing Address		02 11 2016			
	1033 NORTH FAIRFAX STREET		Amount			
	SUITE 400 City State	Zip Code	2050.19			
	ALEXANDRIA VA	22314	Transaction ID : SE.4149  Date of Disbursement or Obligation			
	Purpose of Expenditure MEDIA	Category/ Type	02 / 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
1	Name of Federal Candidate	Support	Office Sought:			
	GREGORY FRANCIS MR. ZOELLER	Oppose	President Senate State: IN			
	Calendar Year-To-Date Per Election for Office Sought		Disbursement For:			
	(a) SUBTOTAL of Itemized Independent Expenditures		4100.39			
	(b) SUBTOTAL of Unitemized Independent Expenditures		<b>&gt;</b>			
	(c) TOTAL Independent Expenditures		299195.25			
١	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	MICHELE REISNER [Electro	onically Filed] Date	04 15 2016			
	Signature					